## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10723324

(Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			43				.	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			ਪੱਤ minus 20=		* 23			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		* 2			X43=		OR	X86=	
ML	JLTIPLE DEPE	NDENT CLAIM P	ESENT					+145=		OR	+290=	
* 11	the difference	e in column 1 is	less than zero, enter "0" in co			olumn 2	1	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								OTHER THAN				
_	,	(Column 1)	<del></del>	(Colun		(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF MU	Minus			= '		X43=		OR	X86=	
<u> </u>	FIRST PRESE	ENTATION OF MI	JUIPLE DEF	ENDENT	CLAIM			+145=		OR	+290=	
								TOTAL		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											ADDII. I EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Ind pendent	*	Minus	***		=		X43=		OR	X86=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
<u>L+</u>								+145=		OR	+290=	
		A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE						
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=	
<b>AME</b>	Independent	*	Minus ***			=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
**	f the "Highest Nu	mber Previously Pa mber Previously Pa	id For IN THIS	SPACE is	less than	20, enter "20."	Al	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT, FEE	
		ber Previously Paid					r foun	nd in the app	ropriate box	in col	umn 1.	